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REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

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1.	NAME OF TOOMMITTEE (in full)		TYPE OF	TYPE OR PRINT ▼		Example: If typing, type over the lines.		12FE4M5		
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ADDRESS (number and street) $1/0.5.2.4.1.1.0.5.5.5.0.5.0.5.5.0.5.5.0.5.5.0.5.5.0.5.5.0.5.5.0.5.5.0.5.5.0.5.5.0.5.5.0.5.0.5.5.0.5.5.0.5.5.0.5.5.0.5.5.0.5.5.0.5.5.0.5.5.0.5.5.0.5.5.0.5.0.5.5.0.5.5.0.5.5.0.5.5.0.5.5.0.5.5.0.5.5.0.5.5.0.5.5.0.5.5.0.0.5.0.5.0.5.0.5.0.0.5.0.5.0.0.5.0.0.5.0.0.5.0.0.5.0.0.5.0.0.5.0.0.0.5.0$										
	thai	Check if different than previously reported. (ACC)		Orianda F.4 [3,2,8,3,2]						
2.	FEC ID	C IDENTIFICATION NU		JMBER ▼		ПΥ▲		STATE ▲ ZIP		CODE A
	C O	05224	5-8		3. IS THIS REPORT	×	NEW (N) OR	AM (A)	ENDED	
4. TYPE OF REPORT (Choose One)			R	onthly eport	Feb 20 (M2)	May 20 (M5)	Aug :	20 (M8)	Nov 20 (M11) (Non-Election Year Only)
	(a) Qua	arterly Reparts:	В	ue On:	Mar 20 (M3)	Jun 20 (M6)	Sep 2	20 (M9)	Dec 20 (M12) (Non-Election Year Only)
	×	April 15 Quarterly Report (Q1 July 15 Quarterly Report (Q2			Apr 20 (M4)	<u></u>	Jul 20 (M7)	Oct 2	20 (M10)	Jan 31 (YE)
			(C)	PRE-Election		Primary (12	•	General (· •	Runoff (12R)
		October 15 Quarterly Report (0	03)	Report for	the:	Convention (12C)		Special (12S) v v v v in th State		
		January 31 Year-End Report (<u></u>	Election on					the ate of
		July 31 Mid-Year Report (Non-election Year Only) (MY)	on (d)	30-Day POST-Elec Report for		General (30	OG)	Runoff (3	0R)	Special (30S)
		Termination Repor (TER)	t	•	Election on	м м .	, , ,	Y Y Y		the ate of
5.	Covering	Period $\overset{\mathtt{M}}{\mathcal{O}}$	") ° c	7 2	513	through	09	30	201	3
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.										
Type or Print Name of Treasurer Chris 72110										
Signature of Treasurer Date 10 10 2013										
V NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.										
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